

PLACE OF BIRTH

ARIZONA STATE BOARD OF HEALTH

1. County of GilaDistrict of ClaypoolTown of Arizona

or

City of MiamiBUREAU OF VITAL STATISTICS
ORIGINAL CERTIFICATE OF BIRTHState Index No. 167County Registrar No. 777Local Registrar No. 777No. Railroad Ave St. Ward
(If birth occurred in a hospital or institution, give its NAME instead of street and number)2. Full name of child Lorraine Rogers { If child is not yet named, make supplemental report, as directed.3. Sex of Child female To be answered ONLY in event of plural births. 4. Twin, triplet or other. 5. No., in order of birth. 6. Legitimate? yes 7. Date of birth Aug 11 1926
Month Day Year8. FATHER
Full name Carl Rex Rogers14. MOTHER
Full maiden name Myrtle Victoria Cole9. Residence
(Usual place of abode) Miami Arizona
If non-resident, give place and state.15. Residence
(Usual place of abode) Miami Arizona
If non-resident, give place and state.10. Color or race White 11. Age at last birthday 29 (Years)16. Color or race White 17. Age at last birthday 29 (Years)12. Birthplace (city or place) Pima
(State or country) Arizona18. Birthplace (city or place) Rockdale
(State or country) Texas13. Occupation Repair man
Nature of industry Copper mill19. Occupation Housewife
Nature of industry20. Number of children of this mother
(Taken as of time of birth of child herein certified and including this child.) (a) Born alive and now living 4
(b) Born alive but now dead 0
(c) Stillborn 021. Were precautions taken against ophthalmia neonatorum? yes

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

I hereby certify that I attended the birth of this child, who was alive at 8:10 P m. on the date above stated
(Born alive or stillborn.)

* When there was no attending physician or midwife, then the father, householder, etc., should make this return. A stillborn child is one that neither breathes nor shows other evidence of life after birth.

Signature J. J. Fowler

(Physician or midwife)

Address Miami, Arizona

Given name added from a supplemental report

Month, day, year

Filed Aug 17 26 19

Local Registrar.

Registrar

Filed _____, 19____

County Registrar.

392-811-435